PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with apple of fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless correct maintenance fee notifica	ed below or directed of ations.	herwise in	n Block 1, by (a) specifying a new					rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
24956	7590 10/31/2008									
MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C. 1800 DIAGONAL ROAD SUITE 370						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
ALEXANDRIA	, VA 22314								(Depositor's name)	
									(Signature)	
									(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED I			TOR ATTORNE		RNEY DOCKET NO.	CONFIRMATION NO.	
10/790,200	00 03/02/2004			Keisuke Hatasak	520.43557X00			1024		
TITLE OF INVENTION		· · · · · · · · · · · · · · · · · · ·	****	1		parkeas to below				
APPLN, TYPE	SMALL ENTITY	ISSU	E FEE DUE	PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1510	\$300		\$0		\$1810	02/02/2009	
EXAM	ART UNIT		CLASS-SUBCLAS	CLASS-SUBCLASS						
NAHAR, QAMRUN			2191	717-168000						
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				or agents OR, alter (2) the name of a registered attorne 2 registered paten	ames of up to 3 registered patent attorneys OR, alternatively, ame of a single firm (having as a member a d attorney or agent) and the names of up to red patent attorneys or agents. If no name is name will be printed. 1 MATTINGLY, STANGER 2 MALUR & BRUNDIDGE, 3 P.C.					
3. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is ident th in 37 CFR 3.11. Comp	ified belo	w. no assignee	data will appear on	the pa	atent. If an assign assignment.			ocument has been filed for	
Hita	Tokyo, Japan									
Longo, bapan										
Please check the appropr	riate assignee category or	categorie	s (will not be p	rinted on the patent):		Individual 🖫 Co	rporati	on or other private gro	up entity Government	
4a. The following fee(s) are submitted: KNssue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies				b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX						
* *	s SMALL ENTITY statu	is. See 37						FITY status. See 37 CI		
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will tes Patent	l not be accepte and Trademark	d from anyone other to Office.	han t	he applicant; a regi	stered a	attorney or agent; or th	e assignee or other party in	
Authorized Signature	/DONN	A K.	MASON/					ary 13, 20	09	
Typed or printed name Donna K. Mason						Registration N	lo	45,962		
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DC	U.S.C. 12 U.S.C. 12 USPTO. rden, shou NOT SE	. The information and 37 CFR Time will vary ald be sent to the ND FEES OR	on is required to obtain 1.14. This collection of depending upon the le Chief Information (COMPLETED FORM	n or r is est indiv Office IS TO	etain a benefit by t	he nubl	ic which is to file (and	by the USPTO to process) g gathering, preparing, and ne you require to complete irtment of Commerce, P.O. for Patents, P.O. Box 1450,	

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.